## CHAPTER 1

## MEDICAL SERVICES

Section	Subject
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2.2	Office Visits With Surgery (TRICARE Claimcheck)
3.1	Home Services
4.1	Hospital Care
4.2	Inpatient Concurrent Care
4.3	Outpatient Observation Stays
5.1	Skilled Nursing Facility Visits
6.1	Nursing Home Visits
7.1	Emergency Department (ED) Services
8.1	Consultations
9.1	Immunization Injections
10.1	TRICARE Standard - Clinical Preventive Services
10.1A	TRICARE Prime - Clinical Preventive Services
10.2	Papanicolaou (PAP) Tests
10.3	Well-Child Care
10.4	Routine Physical Examinations
11.1	Chelation Therapy
12.1A	Limit On Acute Inpatient Mental Health Care Effective October 1, 1991
12.1B	Limit On Residential Treatment Center (RTC) Care Effective October 1, 1991
12.1C	Preauthorization Requirements For Acute Hospital Psychiatric Care Effective October 1, 1991
12.1D	Preauthorization Requirements For Residential Treatment Center Care Effective October 1, 1991
12.1E	Preauthorization Requirements For Substance Use Disorder Detoxification And Rehabilitation
12.1F	Psychiatric Partial Hospitalization Programs - Preauthorization And Day Limits
12.2	Learning Disorders

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12.9	Collateral Visits			
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25.1	Physical Medicine/Therapy			
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26.2	Obstructive Sleep Apnea Syndrome (OSAS)
26.3	Hyperbaric Oxygen Therapy
26.4	Chronic Fatigue Syndrome
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26.6	Diagnostic Genetic Testing And Counseling
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28.1	Telemedicine/Telehealth

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